

03500,046247 (35.C16247)



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

11/B  
T. Steptoe  
8-26-03

In re Application of:	)	
	:	Examiner: Q. Grainger
Hikaru OSADA	)	
	:	Group Art Unit: 2852
Application No.: 10/086,735	)	
	:	
Filed: March 4, 2002	)	
	:	
For: IMAGE FORMING APPARATUS	)	August 6, 2003
HAVING SPEED-CHANGEABLE	:	
IMAGE BEARING BODY	)	

Mail Stop Non-Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Official Action dated May 6, 2003, Applicant respectfully  
submits the following amendments and remarks.

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AUG - 7 2003  
TECHNOLOGY CENTER 2800



In re Application of:

Docket No. 03500.016247. (35.C16247)

Hikaru OSADA

Application No.: 10/086,735

Examiner: Q. Grainger

Filed: March 4, 2002

Group Art Unit: 2852

For: IMAGE FORMING APPARATUS HAVING  
SPEED-CHANGEABLE IMAGE BEARING  
BODY

Date: August 6, 2003

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Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

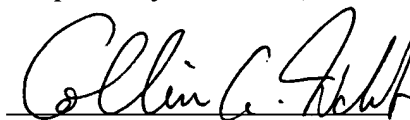
The fee has been calculated as shown below

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	15	MINUS	20	0	x \$9 \$18	\$ 0.00
INDEP. CLAIMS	3	MINUS	3	0	x \$42 \$84	\$ 0.00
Fee for Multiple Dependent claims \$140°/\$280						\$ 0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$ 0.00

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

- ☐ A check in the amount of \$\_\_\_\_\_ is enclosed.
- ☐ Charge \$\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$\_\_\_\_\_ to cover the fee for a \_\_\_\_-month extension is enclosed.
- ☐ A check in the amount of \$\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicant

Collin A. Webb

Registration No. 44,396

FITZPATRICK, CELLA, HARPER & SCINTO

30 Rockefeller Plaza

New York, New York 10112-3801

Facsimile: (212) 218-2200

CAW:ayr

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